

APPLICATION FOR THE SPACEFLIGHT AND LIFE SCIENCES TRAINING PROGRAM (SLSTP)

Application Deadline – January 31st

Please read carefully and complete the application in BLACK INK.

I. Eligibility Requirements

- A. Students who are currently enrolled and pursuing their first undergraduate degree.
- B. Students who have a minimum cumulative GPA of 3.0 at the time of the application.
- C. Students who will have completed their freshman, sophomore or junior year at the start of the program. Graduating seniors (those who will complete their senior year prior to the start of the program, mid-June) are not eligible to apply.
- D. Students who are U.S. citizens and at least eighteen years old. **U.S. CITIZENSHIP REQUIRED.**
- E. Students who are pursuing an eligible major such as these listed below:

Animal Sciences
Biochemistry
Bioengineering
Biology
Biophysics
Bio-statistics

Chemistry
Computer Sciences
Ecology
Engineering
Environmental Science
Geology

Life Sciences
Mathematics
Pharmacy
Physics
Plant Sciences
Pre-Med/Dent/Vet
Psychology

If you have any questions about the eligibility of your major, please call us at (334) 724-4589.

- F. Previous SLSTP participants are not eligible for a second experience.

II. Application Materials

The following application materials must be fully completed and post-marked no later than January 31st:

- Application Form typed or printed in BLACK INK.
- An official transcript from every college or university attended up to and including the present semester. Transcripts in the possession of the applicant will not be accepted. Do not submit transcripts from other institutions that were attended for less than two semesters.
- A self – addressed SLSTP postcard. (It will be returned when all of the application materials have been received in our office).
- A typed essay (double spaced), which will be used to evaluate the applicant's experience and written communication skills. The essay should relate to the classroom, laboratory and/or research experiences of the applicant in the sciences or engineering. Moreover, the career goals of the applicant should be concisely stated along with a statement reflecting interest in this space program. Print your full name on each page of the essay.
- Three (3) reference request forms or letters of recommendations from persons familiar with the academic record of the applicant.

Completed applications and requests for application materials should be mailed to the address below:

***SLSTP Application Office
Tuskegee University
100 Campbell Hall
Tuskegee Institute, AL 36088***

Applicants will be notified of their acceptance/non-acceptance no later than March 31st. All necessary credentials must be on file before an application will be considered.

SPACEFLIGHT AND LIFE SCIENCES TRAINING PROGRAM (SLSTP)

APPLICATION FOR ADMISSION

Tuskegee University
100 Campbell Hall
Tuskegee Institute, AL 36088

COMPLETE EACH ITEM. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. This is an Equal Opportunity Program.

1. _____
Last Name

First Name

Middle/Maiden Name

2. _____
U.S. Social Security Number
If there is a possibility that any credentials (transcripts or letters of recommendations may arrive under a name different than that given in this item, please provide name(s) here:

3. Date of Birth (e.g. May 3, 1971 is 05-03-71)

Mo. Day Yr.

4. Place of Birth

City

State

5. Sex: ☐ Female ☐ Male

6. Marital Status:
Married ☐ Single ☐ Number of Children _____

7. Race and/or Ethnic Origin (Check One):

- ☐ Native American or Alaskan Native
☐ Asian or Pacific Islander
☐ African American (Black)

- ☐ Hispanic
☐ White, not of Hispanic origin
☐ Other, specify: _____

8a. Current mailing address (All correspondence will be mailed to this address.)
(IMPORTANT: Report any changes immediately.)

Number & Street (or P.O. Box)

City State Zip Code
Telephone: _____ E-mail Address: _____

8b. Alternate mailing address

Number & Street (or P.O.Box)

City State Zip Code
Alternate E-mail Address: _____

9. Permanent mailing address

<hr/>		
Number & Street (or P.O. Box)		
<hr/>		
City	State	Zip Code
Telephone: <hr/>		

10. Institution where you are currently enrolled

 Department

<hr/>		
Number & Street (or P.O. Box)		
<hr/>		
City	State	Zip Code
Department Telephone <hr/> E-mail address <hr/>		

11. Current Academic Classification:

<input type="checkbox"/> Freshman	<input type="checkbox"/> Junior	Major: <hr/>
<input type="checkbox"/> Sophomore	<input type="checkbox"/> Senior	Expected Graduation Date: <hr/>

12. List your current college or university indicating dates of attendance. Also, list previously attended schools only if you attended them for two (2) semesters or longer. Do not list schools where you have attended for only one semester or where you have taken single courses. You must submit a transcript for each of the schools listed. (maximum of three schools!)

	Institution	Location	From (MM/YY)	To (MM/YY)	Degree Received
1.	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
2.	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
3.	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

13. Are you a U.S. citizen? ☐ Yes ☐ No

Naturalization Certificate Number

14. Have you applied to the SLSTP before?

☐ Yes ☐ No

If yes, when

15. Have you pleaded no contest to, or been convicted of, a first-degree misdemeanor or felony? ☐ Yes ☐ No If yes, explain fully:

16. List any skills or certification (Pilot's License, CPR, EMT, Lifesaving, Scuba, etc.) that you possess (indicate dates). Also, list all of your college activities such as athletics, clubs, dramatics, arts, music, volunteer work, debate, science clubs, research experience, summer programs, teaching assistantships, research assistantships, work-study jobs, space-related activities, aviation activities, etc. DO NOT include high school activities unless you are currently a college freshman. (You may attach a separate sheet.) Please do not send copies of theses, term papers or other unpublished schoolwork.

17. How did you hear about SLSTP? ☐ Brochure/Poster ☐ Recruiter ☐ Former SLSTP Participant ☐ Instructor/Advisor
☐ Internet ☐ Other (Specify) _____

18. Attach a concise essay (double spaces) of 250 words, that includes statements related to your classroom, laboratory and/or research experience in the sciences. Your career goals should also be stated explicitly. Please print your full name on each page of the essay.

19. List the names of three (3) individuals from whom you will request letters of recommendation.

- a. _____
- b. _____
- c. _____

IMPORTANT: EACH APPLICANT MUST READ AND SIGN THE FOLLOWING SECTION

I certify that the information given in this application is complete and accurate, and I understand that to make false or fraudulent statements within this application may result in denial of admission. If admitted, I hereby agree to abide by the policies and the rules of regulations of Kennedy Space Center and Tuskegee University. Should any of the information I have given change prior to my entry into the program, I will immediately notify the Spaceflight and Life Sciences Training Program Application Office at Tuskegee University.

APPLICANT'S SIGNATURE

SOCIAL SECURITY NUMBER

DATE

U.S. CITIZENSHIP REQUIRED

Letter of Recommendation

FOR

SPACEFLIGHT AND LIFE SCIENCES TRAINING PROGRAM

A SUMMER PROGRAM at the JOHN F. KENNEDY SPACE CENTER, FLORIDA, USA

TO BE COMPLETED BY THE APPLICANT

Applicant's name: _____

Last

First

Middle

Social Security Number: _____ - _____ - _____

TO BE COMPLETED BY THE REFEREE

You may wish to make additional comments by letter. If so, please attach your letter to this form so that the selection committee may identify the applicant's suitability for this program.

I. Knowledge of the Applicant:

Approximately how long have you known this applicant? _____

How well do you feel you know the applicant? Casually _____ Well _____ Very Well _____

What was the nature of your contact(s) with the applicant?

Teacher _____ Research Advisor _____ Major Advisor _____ Employer _____ Other (specify): _____

II. Personal Characteristics: In comparison with other students in the same field who have the same amount of experience and training, I rate this person as follows:

	Top 1%	Top 5%	Top 10%	Top 25%	Unable to rate
Applicant adapts well to a new environment					
Applicant grasps new concepts easily					
Applicant works well independently					
Applicant is dependable					
Applicant is self-starter					
Applicant sees project to completion					
Applicant is organized (Applicant shows good organizational skills)					
Applicant practices good leadership qualities					
Personal presentation of applicant					
Applicant works well in a group					
Applicant has good communication skills					
Applicant's academic record is good					
Applicant is suitable for this program					

Applicant's name: _____
Last First

III. **PLEASE DESCRIBE A SPECIFIC ACHIEVEMENT OF THE APPLICANT** that demonstrates the potential for success in this summer program: (Describe projects, situations, etc. where the Applicant has demonstrated exceptional achievement. Use additional paper as needed.)

IV. **ADDITIONAL COMMENTS:** Please add any comments, which you feel, will assist in evaluating the applicant's potential to pursue the Spaceflight and Life Sciences Training Program.

RECOMMENDATION: Considering this applicant's academic record, special abilities, ambition and determination, please indicate your recommendation:

_____ Recommend Strongly	_____ Recommend with reservation
_____ Recommend	_____ Cannot recommend (Explain)

Name of referee (please print): _____

Signature _____ Date: _____

Title: _____ Organization: _____

City, State, and Zip code: _____

Phone number (required): _____ E-mail (required): _____

Letters of recommendation cannot be accepted directly from the applicant. Do not send letters of recommendation electronically. Send original signed form to the following address:

**Spaceflight and Life Sciences Training Program
Application Processing Office
Tuskegee University
100 Campbell Hall
Tuskegee Institute, AL 36088**

For more information visit the Spaceflight and Life Sciences Training Program website: <http://slstp.nasa.gov>

You can send e-mail to our SLSTP address at Tuskegee University: slstp@tuskegee.edu

Applicant's Name: _____
Last First

Transcript Request Instructions

Spaceflight and Life Sciences Training Program

A summer program at the Kennedy Space Center, Florida, USA
Sponsored by The National Aeronautics and Space Administration

Student Applicants Only: Contact the Registrar's Office or appropriate academic official at your institution. Request that a formal transcript to be sent to the Spaceflight and Life Sciences Training Program Application Processing Office. Only official transcripts will be accepted. Please provide a transcript for every institution where you have studied for two or more semesters.

To the Office of the Registrar:

One of your students, _____ has applied for a NASA summer training program at Kennedy Space Center. Please forward an official transcript to the above address prior to January 31st. Transcripts received after that date cannot be accepted.

Thank you,

Audrey A. Trotman, Ph.D.
Executive Coordinator
SLSTP Application Office
Tuskegee University
Tuskegee Institute, AL 36088

Transcripts must be received no later than January 31st. Send to:
Spaceflight and Life Sciences Training Program
Attn: Application Processing Office
100 Campbell Hall
Tuskegee Institute, AL 36088

For more information or to clarify an issue, visit the Spaceflight and Life Sciences Training Program website:
<http://slstp.nasa.gov>

You can send e-mail to our SLSTP e-mail address at Tuskegee University: slstp@tuskegee.edu.

Application Materials Check List

ALL MATERIALS MUST BE POSTMARKED NO LATER THAN JANUARY 31st

- _____ Completed Application Form
- _____ Official Transcript (students only)
- _____ Letters of Recommendation (3)
- _____ Personal Essay (students only)
- _____ Curriculum vitae (project counselors only)
- _____ History of experience in teaching, coaching, team-building, etc. (project counselors only)
- _____ Include a self-addressed stamped postcard

Applicants are advised to follow up with the Registrar's Office and References to ensure that materials are submitted on time. This list is provided for your convenience. Do not return it with your application form.

U.S. CITIZENSHIP REQUIRED